

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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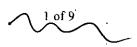
Issuance of Promissory Notes	t and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): Rule : Type of Filing: New Filing Amendment	504 Rule 505 Rule 506 Section 4(6)	1395449
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	14-748140-311	
Name of Issuer ([] check if this is an amendment an	nd name has changed, and indicate change.)	~~~.···
PLGJ Inc.		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
85 Liberty Ship Way, Suite 110, Sausalito, CA 9		415-331-6975
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business	,	· · · · · · · · · · · · · · · · · · ·
Media production		PROCESSED
	partnership, to be formed	APR 0 6 2007
Actual or Estimated Date of Incorporation or Organizat Jurisdiction of Incorporation or Organization: (Enter to CN for		mated E THOMSON FINANCIAL
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers making an offering of securit 77d(6).	ies in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 and Exchange Commission (SEC) on the earlier of the which it is due, on the date it was mailed by United Sta	late it is received by the SEC at the address given b	A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commis-	sion, 450 Fifth Street, N.W., Washington, D.C. 20	
Copies Required: Five (5) copies of this notice must be photocopies of the manually signed copy or bear typed		ly signed. Any copies not manually signed must be
Information Required: A new filing must contain all in thereto, the information requested in Part C, and any man not be filed with the SEC.		
Filing Fee: There is no federal filing fee.		
State: This notice shall be used to indicate reliance on the Ut ULOE and that have adopted this form. Issuers relying		

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are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



this notice and must be completed.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ✓ Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Glen Janssens Business or Residence Address (Number and Street, City, State, Zip Code) 85 Liberty Ship Way, Suite 110, Sausalito, CA 94965 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Paul Lundahl Business or Residence Address (Number and Street, City, State, Zip Code) 85 Liberty Ship Way, Suite 110, Sausalito, CA 94965 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

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C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ι.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity		
	Common Preferred		
	Convertible Securities (including warrants)	1,000,000.00	150,000.00 \$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.	·	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$_150,000.00
	Non-accredited Investors	•	\$
	Total (for filings under Rule 504 only)	 	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		·
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		s
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_14,000.00
	Accounting Fees		\$
	Engineering Fees	·	\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)	_	\$
	Total		\$_14,000.00

;	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross proceeds to the issuer."		986,000.00
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	,	
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		
	Purchase of real estate	_] 3	
	Purchase, rental or leasing and installation of machinery and equipment	¬\$	□\$
	Construction or leasing of plant buildings and facilities		
	Acquisition of other businesses (including the value of securities involved in this		
	offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	\$	
	Repayment of indebtedness		
	Working capital		
	Other (specify):	_ 	\$ _
		s	.
	Column Totals		
	Total Payments Listed (column totals added)		
	D. FEDERAL SIGNATURE		
_			
Γh sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commis	sion, upon writte	ne 303, the following request of its sta
the	information furnished by the issuer to any non-accredited investor parsuant to paragraph (b)(2) of I	Rule 502.	
lcc		Date —	
	GJ Inc.	March 13, 2007	
•	me of Signer (Print or Type) Title of Signer (Print or Type)		
	n Janssens President		
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Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)